

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Arlene A. Wise

Docket No.: S-100,654

Serial No.:

10/665,455

Examiner:

Delia M. Ramirez

Filed

September 18, 2003

Art Unit:

1631

For

DETECTION OF PHENOLS USING ENGINEERED BACTERIA

Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

### **TRANSMITTAL**

Transmitted with this mailing are the following documents for submission in the above-identified patent application:

- 1. Amendment/Response;
- 2. Fee Transmittal:
- 3. Combined Declaration and Power of Attorneys - 3 originals:
- 4. Replacement Sheet of Figs 2a and 2b;
- 5. Amended Sequence Listing - Mark-up Copy;
- 6. Amended Sequence Listing - Mark-up Copy Computer Readable

Form;

7. Amended Sequence Listing - Clean Copy;

Amended Sequence Listing - Clean Copy Computer Readable Form; and

8. Return Postcard

Date: Jeme 5t, 2007

Reg. No. 35,355

Phone: (505) 667-0304

Respectfully submitted,

Signature of Attorney Kenneth K. Sharples

Los Alamos National Laboratory

LC/IP, MS A187

Los Alamos, NM 87545

Fee Paid



# **TRANSMITTAL** For FY 2007

Patent fees are subject to annual revision

Applicant claims small entity status. See 37 CFR 1.27

TOTAL	AΜ	OUNT	OF P	AYMENT

C	omplete if Known	
Application Number:	10/665,455	
Filing Date:	9/18/2003	
First Named Inventor:	Arlene A. Wise	
Examiner Name:	Delia M. Ramirez	
Group/Art Unit:	1652	
Attorney Docket No.:	S-100,654	

## METHOD OF PAYMENT (check all that apply)

1. 

The commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 12-2150 Deposit Account Name: Los Alamos National Laboratory

□ Charge Any Additional Fee Required Under

**FEE CALCULATION** 

(for each additional 50 sheets that exceeds 100 sheets)

**EXTRA CLAIM FEES/APPLICATION SIZE FEE** 

-20\*\* =

-3 \*\* =

Extra

X 180

**Fee Description** 

Claims in excess of 20

\*\* or number previously paid, if greater; For Reissues, see below

Claims

Fee Description

Search Fee

Basic Filing fee

Reissue Filing fee

**Examination Fee** 

Provisional Filing Fee

Provisional Size Fee

SUBTOTAL (1) \$00.00

Below

Independent claims in excess of 3

excess of 3 over original patent

Multiple dependent claim, if not

Reissue independent claims in

Reissue claims in excess of 20

Fee from Fee Paid

\$

= \$

Fee Paid

\$0.00

\$0.00

\$0.00

\$

37 C.F.R. 1.16 and 1.17

1. COMBINED FILING FEE

Large Entity Small Entity Fee

1001 \$300 2001 \$150

1004 \$300 2004 \$150

1111 \$500 2111 \$250

1311 \$200 2311 \$100

1005 \$200 2005 \$100

1085 \$250 2085 \$125

**Total Claims** 

Independent

Multiple Dependent

1202 \$50 2202 \$25

1201 \$200 2201 \$100

1203 \$360 2203 \$180

1204 \$200 2204 \$100

1205 \$50 2205 \$25

Small

**Entity** 

Fee

Claims

Large

Entity

Fee

# FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Small **Entity** Entity Fee Fee Fee Code (\$) Code (\$)

Fee Description

1051 \$130 2051 \$65 Surcharge - late filing fee or oath

1052 \$50 2052 \$25 Surcharge - late provisional filing fee or cover sheet

1812 \$25201812 \$2520 For filing a request for reexamination

1251 **\$120** 2251 **\$60** Extension for reply within first month

1252 \$450 2252 \$225 Extension for reply within second month \$225.00

1253 \$1020 2253 \$510 Extension for reply within third month

1254 \$1590 2254 \$795 Extension for reply within fourth month

1255 \$2160 2255 \$1080 Extension for reply within fifth month

1401 \$500 2401 \$250 Notice of Appeal

1402 \$500 2402 \$250 Filing a brief in support of an appeal

1403 \$1000 2403 \$500 Request for oral hearing

1452 \$500 2452 \$250 Petition to revive - unavoidable

1814 **\$110** 2814 **\$55** Terminal Disclaimer

1453 \$1500 2453 \$750 Petition to revive - unintentional

1460 \$130 1460 \$130 Petitions to the Director

1806 \$180 1806 \$180 Submission of Information Disclosure Statement

1809 \$790 2809 \$395 Filing a submission after final rejection

(37 CFR 1.129 (a))

1810 \$790 2810 \$395 For each additional invention to be

examined (37 CFR 1.129(b))

1811 \$100 1811 \$100 Certificate of Correction

1504 \$300 1504 \$300 Publication fee for early, voluntary,

or normal publication/Republication fee 1801 \$790 2801 \$395 Request for Continued Examination (RCE)

Other fee (specify)

#### over original patent Total Claims Fee \$

#### APPLICATION SIZE FEE

1081 \$250 2081 \$125.00 For each additional 50 sheets

paid.

that exceed 100 sheets. including specification and

drawings

SUBTOTAL (2) \$

(Include total of Claims Fees and Size Fee here)

SUBTOTAL (3)

\$225.00

Reduced by Basic Filing Fee Paid

**SUBTOTAL FROM 1** \$0.00 **SUBTOTAL FROM 2** \$0.00 **SUBTOTAL FROM 3** \$225.00

TOTAL AMOUNT OF PAYMENT

(Enter total amount at top of page)

\$225.00

SUBMITTED BY		Complete (if applicable)		
Printed Name:	Bruce H. Cottrell		Reg. No.	30,620
Signature:	Brun Id Cottall	Date: May 31, 2017	Telephone	(505) 667-9168